

UNITED STATES POSTAL SERVICE
TX 773
03 MAR '15
PM 6:1

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

RECEIVED
15 MAR - 9 AM 11:00
SUPERFUND DIV.
DIRECTORS OFF.

• Sender: Please print your name, address, and ZIP+4 in this box •

Robert Werner
Environmental Protection Agency, Region 4
Superfund Division, 6SF-TE
1445 Ross Avenue
Dallas, Texas 75202

02273399

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <u>Chris Werner</u> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Print Name) <u>Chris Werner</u> C. Date of Delivery <u>MAR 02 2015</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>CT Corporation System, Registered Agent for Valero Refining-Texas, L.P. 1999 Bryan St., Ste. 900 Dallas, Texas 75201-3136</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7014 0150 0000 2452 8357</p>	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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